

TRW

Please type a plus sign (+) inside this box → ☒

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	<b>Application Number</b>	10/666,548	
	<b>Filing Date</b>	SEPTEMBER 22, 2003	
	<b>First Named Inventor</b>	Eikichi SUDA	
	<b>Group Art Unit</b>	3762	
	<b>Examiner Name</b>	To Be Assigned	
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	38323-193276

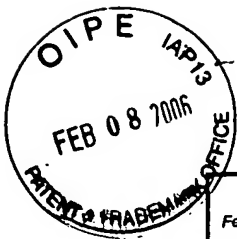
ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> <b>Fee Transmittal Form (No Fee)</b>  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> <b>Information Disclosure Statement; Form PTO/SB/08A; Copy of German Office Action; and 3 Refs. (w/copy of English abstract for DE19817273A1)</b>  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
<b>Firm or Individual name</b>	Catherine M. Voorhees Reg. No. 33,074	<b>26694</b> PATENT TRADEMARK OFFICE
<b>Signature</b>		
<b>Date</b>	February 8, 2006	

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450b on this date: _____			
<b>Typed or printed name</b>	<u>Catherine M. Voorhees</u>		
<b>Signature</b>		<b>Date</b>	_____



SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, 22313-1450.  
#722207



PTO/SB/17 (12-04v2)  
Approved for use through 7/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2006</b>		Application Number	10/666,548
		Filing Date	September 22, 2003
		First Named Inventor	Eikichi SUDA
		Examiner Name	To Be Assigned
		Art Unit	3762
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	38323-193276
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(\$)</b>	

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

**Total Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**    **Multiple Dependent Claims**

\_\_\_\_\_ - 20 = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_    **Fee (\$)**    **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**

\_\_\_\_\_ - 3 = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____ / 50 _____ (round up to a whole number) x _____	_____	_____

**4. OTHER FEE(S)**    **Fees Paid (\$)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	33,074
Name (Print/Type)	Catherine M. Voorhees	Telephone	(202) 344-4000
		Date	February 8, 2006

#722201



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Eikichi SUDA

Appln. No. 10/666,548

Confirmation No. 5550

Filed: September 22, 2003

For: ELECTRONIC DEVICE FOR HEALTH  
INDEX MEASUREMENT AND  
CONTROL METHOD OF THE SAME

Art Unit : 3762

Examiner: To Be Assigned

Atty. Docket No. 38323-193276

Customer No.  
26694

PATENT TRADEMARK OFFICE

**Information Disclosure Statement**

Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This is an Information Disclosure Statement submitted under 37 C.F.R. § 1.97 within the time specified under 37 C.F.R. § 1.97(b).

In order to comply with the duty of disclosure pursuant to 37 C.F.R. § 1.56, submitted herewith is a Form PTO/SB/08A listing four documents. Cite Nos. 2 and 3 are cited in the attached German Patent Office Action, which was issued in connection with corresponding German Patent Application No. 10343520.4. Cite No. 1 is an English-language (U.S. patent) family patent of Cite No. 2. Cite No. 4 is a family patent of Cite No. 3, where the claims are in the English language on pages 6 and 7. The relevance of each non-English-language document can be gleaned from the English-language abstracts provided and/or the claims. Copies of the non-U.S. references are included herewith, together with a translation of the Abstract of DE 198 17 273 A1.

Application No. 10/666,548  
Applicants: Eikichi SUDA

The present IDS is being filed before the mailing date of the first Office Action on the merits and, therefore, no Statement Under 37 C.F.R. § 1.97(e) or fee under 37 C.F.R. § 1.17(p) is required.

In view of the above, no further statement of relevance need be given and, as all requirements of 37 C.F.R. § 1.97 and § 1.98, and all official guidelines pertaining to Information Disclosure Statements have been complied with, it is respectfully requested that the Examiner consider the cited publications and make them of record.

It is believed that no fee is required for the submission of this Information Disclosure Statement; however, if a fee is determined to be due, please charge the amount to our Deposit Account No. 22-0261, and advise the undersigned accordingly.

Respectfully submitted,

Date: February 8, 2006



Catherine M. Voorhees  
Registration No. 33,074  
VENABLE LLP  
P.O. Box 34385  
Washington, D.C. 20043-9998  
Telephone: (202) 344-4000  
Telefax : (202) 344-8300

CMV/SJB  
#722020

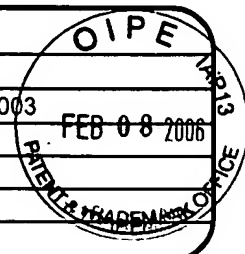
Please type a plus sign (+) inside this box → +

PTO/SB/08A (08-00)

Approved for use through 10/31/2002. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO				<b>Complete if Known</b>		
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(use as many sheets as necessary)</i>				Application Number	10/666,548	
				Filing Date	September 22, 2003	
				First Named Inventor	Eikichi SUDA	
				Group Art Unit	3762	
				Examiner Name	To Be Assigned	
Attorney Docket Number	38323-193276					
Sheet	1	of	1			



U.S. PATENT DOCUMENTS						
Examiner Initials *	Cite No. <sup>1</sup>	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number	Kind Code <sup>2</sup> (if known)			
	1	6,326,884		WOHLRABE	12-04-2001	

FOREIGN PATENT DOCUMENTS							
Examiner Initials *	Cite No. <sup>1</sup>	Foreign Patent Document			Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Office <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)			
	2	DE	DE 198 17 273 A1		BRAUN GmbH	10-21-1999	
	3	WO	WO 98/47423		SCHNEIDER, Edgar	10-29-1998	
	4	EP	EP 0 979 053 B1		SCHNEIDER, Edgar	04-21-1998	

OTHER PRIOR ART – PENDING PATENT APPLICATIONS			
Examiner Initials *	Cite No. <sup>1</sup>		

Examiner Signature		Date Considered	
--------------------	--	-----------------	--

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Unique citation designation number. <sup>2</sup> See attached Kinds of U.S. Patent Documents. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

#722044

**VENABLE**  
ATTORNEYS AT LAW